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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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EXAMINER
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BONSHOCK, DENNIS G

ART UNIT	PAPER NUMBER
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2173

DATE MAILED: 07/05/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Office Action Summary</b>	<b>Application No.</b>		<b>Applicant(s)</b>	
	09/990,972		AUER ET AL.	
	<b>Examiner</b>		<b>Art Unit</b>	
	Dennis G. Bonshock		2173	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

### Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

### Status

- 1) ☒ Responsive to communication(s) filed on 11 April 2005.
- 2a) ☐ This action is **FINAL**.                      2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

### Disposition of Claims

- 4) ☒ Claim(s) 1-8 and 11-20 is/are pending in the application.
- 4a) Of the above claim(s) \_\_\_\_\_ is/are withdrawn from consideration.
- 5) ☐ Claim(s) \_\_\_\_\_ is/are allowed.
- 6) ☒ Claim(s) 1-8 and 11-20 is/are rejected.
- 7) ☐ Claim(s) \_\_\_\_\_ is/are objected to.
- 8) ☐ Claim(s) \_\_\_\_\_ are subject to restriction and/or election requirement.

### Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on \_\_\_\_\_ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.  
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).  
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

### Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All    b) ☐ Some \* c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
  2. ☐ Certified copies of the priority documents have been received in Application No. \_\_\_\_\_.
  3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

\* See the attached detailed Office action for a list of the certified copies not received.

### Attachment(s)

- |   |   |
|---|---|
| 1) <input type="checkbox"/> Notice of References Cited (PTO-892)                        | 4) <input type="checkbox"/> Interview Summary (PTO-413)                     |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948)    | Paper No(s)/Mail Date. _____  |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08) | 5) <input type="checkbox"/> Notice of Informal Patent Application (PTO-152) |
| Paper No(s)/Mail Date _____   | 6) <input type="checkbox"/> Other: _____                                    |

*W*

## DETAILED ACTION

### *Response to Amendment*

1. It is hereby acknowledged that the following papers have been received and placed on record in the file: Amendment as received on 4-11-05.

3. Claims 1-20 have been examined.

#### Status of Claims:

4. Claims 1-5, 15, 18, and 20 are rejected under 35 U.S.C. 102(e) as being anticipated by Schoenberg et al., Patent #6,322,502, hereinafter Schoenberg.

5. Claims 6, 7, 16, and 17 rejected under 35 U.S.C. 103(a) as being unpatentable over Schoenberg.

6. Claims 8, 11-14, and 19 are rejected under 35 U.S.C. 103(a) as being unpatentable over Schoenberg and Schwuttke et al., Patent #6,222,547, hereinafter Schwuttke.

7. Claims 9 and 10 have been canceled by the applicant.

### ***Claim Rejections - 35 USC § 112***

8. The following is a quotation of the first paragraph of 35 U.S.C. 112:

The specification shall contain a written description of the invention, and of the manner and process of making and using it, in such full, clear, concise, and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same and shall set forth the best mode contemplated by the inventor of carrying out his invention.

9. Claim 1 is rejected under 35 U.S.C. 112, first paragraph, as failing to comply with the enablement requirement. The claim(s) contains subject matter which was not described in the specification in such a way as to enable one skilled in the art to which it pertains, or with which it is most nearly connected, to make and/or use the invention. It

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is unclear what is meant by the "nonrestrictive plurality of available medical parameters" through reading the specification.

### ***Claim Objections***

10. Claim 2 is objected to because of the following informalities: It is unclear what the significance of "areas" is in "said first and second window areas". Appropriate correction is required.

### ***Claim Rejections - 35 USC § 102***

1. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(e) the invention was described in (1) an application for patent, published under section 122(b), by another filed in the United States before the invention by the applicant for patent or (2) a patent granted on an application for patent by another filed in the United States before the invention by the applicant for patent, except that an international application filed under the treaty defined in section 351(a) shall have the effects for purposes of this subsection of an application filed in the United States only if the international application designated the United States and was published under Article 21(2) of such treaty in the English language.

2. Claims 1-5, 15, 18, and 20 are rejected under 35 U.S.C. 102(e) as being anticipated by Schoenberg et al., Patent #6,322,502, hereinafter Schoenberg.

3. With regard to claim 1, which teaches a network compatible configurable user interface system for displaying sequentially generated patient medical information and data together with a time indication for identifying a trend, Schoenberg teaches, in column 7, lines 32-43, column 4, line 5, and in figure 2A, a networked system for providing medical data in a time indicated form, with user changeable settings. With regard to claim 1, further teaching a display menu generator for generating, Schoenberg teaches, in column 7, lines 22-31, a displayed menu bar. With regard to claim 1, further

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teaching a single customizable menu enabling a user to select parameters for display in a first graphical format and in a second tabular format, Schoenberg teaches, in column 7, lines 22-43, and in figure 2A, a customizable menu for selecting parameters to be displayed in tabular and graphical views. With regard to claim 1, further teaching a menu containing a set of medical parameter labels representing a corresponding plurality of available medical parameters, Schoenberg teaches, in column 7, lines 36-43, and in figure 2A, a menu allowing for selection of medical parameter labels, which provide an associated set of medial parameters, where the measured characteristics displayed are selectively determined by the user (see column 7, lines 13-22).

With regard to claim 1, further teaching a first window for displaying a list of user selected ones of said plurality of available medical parameters for display in a general format, a second window for displaying a list of user selected one of said plurality of available medical parameters for display in a tabular format, Schoenberg teaches, in column 7, lines 22-36, the offering to the user of up to four simultaneous displays where each of the data sets can be displayed in a variety of formats including graphical, tabular, bar chart, and pie chars formats, with or without spilt screen; each capable of displaying user selected medical parameters. With regard to claim 1, further teaching parameter selection icons enabling user selection of medical parameter labels from the menu and display of said selected medical parameters labels in a selected one of the first and second windows, wherein a user is able to configure a user interface image display by selecting a first of said medical parameter labels form said menu for display exclusively in graphical format and a second of said medical parameter labels for, from

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said menu for display exclusively in tabular format, and a display generator for generating display of the selected parameters, Schoenberg teaches, in column 6, lines 38-41, the users ability to view medical graphics in exclusively graphic-only, exclusively tabular-only, or graphic/tabular display forms; and in column 7, lines 22-43, and in figures 2A and 2B, the display of only graphical data or only tabular data where selection of elements is made via icons on a menu bar (Vital, Resp., Hematology, Validate), and through selection of a parameter icon, providing the graphical (and/or tabular) representation of the selected parameter to be displayed.

4. With regard to claim 2, which teaches incorporating selected parameters in first and second window areas of the customization menu, Schoenberg teaches, in column 7, lines 36-43, and in figure 2A, selection of an parameter icon provides the graphical and tabular representation to be displayed. With regard to claim 2, further teaching the display generator displaying parameter data associated with the first window in a graphical format and displaying parameter data associated with the second window in a tabular format, Schoenberg teaches, in column 6, lines 38-55 and in figure 2A, a display of the selected data in a graphical and tabular view. The display of

5. With regard to claim 3, which teaches the customization menu enabling allocation of a plurality of different sets of selected parameters to a corresponding plurality of display categories, Schoenberg teaches, in column 7, lines 22-43, and in figure 2A and figure 2B, a customizable menu for selecting a plurality of parameters to be displayed in tabular and graphical views.

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6. With regard to claim 4, which teaches the categories include at least two associated with medical categories, Schoenberg teaches, in column 7, lines 22-53, and in figure 2A, the categories including homodynamic function, neurology, laboratory results, and other such medical measurements.

7. With regard to claim 5, which teaches the customization menu enabling display of at least one predetermined list of selected parameters associated with a particular display category, Schoenberg teaches, in column 7, lines 36-53, and in figure 2A, a list of specific parameters being displayed (DBP, SBP, and CVP) corresponding to VITAL SIGNS.

8. With regard to claim 15, which teaches a network compatible configurable user interface system for displaying sequentially generated patient medical information and data together with a time indication for identifying a trend, Schoenberg teaches, in column 7, lines 32-43, column 4, line 5, and in figure 2A, a networked system for providing medical data in a time indicated form, with user changeable settings. With regard to claim 15, further teaching a display menu generator for generating, Schoenberg teaches, in column 7, lines 22-31, a displayed menu bar. With regard to claim 15, further teaching a single customizable menu enabling a user to select parameters for display in a first graphical format and in a second tabular format, Schoenberg teaches, in column 7, lines 22-43, and in figure 2A, a customizable menu for selecting parameters to be displayed in tabular and graphical views. With regard to claim 15, further teaching a menu containing a set of medical parameter labels representing a corresponding plurality of available medical parameters, Schoenberg

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teaches, in column 7, lines 36-43, and in figure 2A, a menu allowing for selection of medical parameter labels. With regard to claim 15, further teaching a first and second window areas for displaying user selected parameters for displaying with associated parameter data in graphical and tabular format respectfully, Schoenberg teaches, in column 7, lines 36-43, and in figure 2A, selection of an parameter icon provides the graphical and tabular representation to be displayed. With regard to claim 15, further teaching parameter selection icons enabling user selection of medical parameter labels from the menu, wherein a user is able to select medical parameter labels for display in graphical format exclusively of selection of parameter labels for display in tabular format, Schoenberg teaches, in column 6, lines 38-41, the users ability to view medical graphics in exclusively graphic-only, exclusively tabular-only, or graphic/tabular display forms; and in column 7, lines 22-43, and in figures 2A and 2B, the display of only graphical data or only tabular data where selection of elements is made via icons on a menu bar (Vital, Resp., Hematology, Validate), and through selection of a parameter icon, providing the graphical (and/or tabular) representation of the selected parameter to be displayed. With regard to claim 15, further teaching the display generator displaying parameter data associated with the first window in a graphical format and displaying parameter data associated with the second window in a tabular format, Schoenberg teaches, in column 6, lines 38-55 and in figure 2A, a display of the selected data in a graphical and tabular view.

9. With regard to claims 18 and 20, which teach user being able to select a third of said medical parameter labels from said menu for display in said first window for display



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in graphical format and said second window for display in tabular format, Schoenberg teaches, in column 7, lines 22-36, the offering to the user of up to four simultaneous displays where each of the data sets can be displayed in a variety of formats including graphical, tabular, bar chart, and pie charts formats, with or without split screen; each capable of displaying user selected medical parameters, where selection of elements is made via icons on a menu bar (Vital, Resp., Hematology, Validate), as is the user enabled to select a different medical parameter for display in each of the plurality of windows (in this case a graphical one and a tabular one), the user is able to select the same medical parameter, in both windows, which is visible in all of the windows of figure 2B.

***Claim Rejections - 35 USC § 103***

10. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

11. Claims 6, 7, 16, and 17 rejected under 35 U.S.C. 103(a) as being unpatentable over Schoenberg.

12. With regard to claims 6 and 16, which teach the customization menu further comprising placement selection icons for re-ordering display of selected parameters, Schoenberg teaches, in figure 2A, a menu bar with two icons which both include a plus sign but have a line connected to it in opposite directions, It would have been obvious to one of ordinary skill in the art, having the teachings of Schoenberg before him at the

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time the invention was made to realize that most tabular programs have a means of reordering entries based on some sort of least to greatest or greatest to least ordering. This is further usually done through the selection of such an icon.

13. With regard to claims 7 and 17, which teach the customization menu further comprising category selection icons for re-ordering display of available categories of medical parameters for user selection, Schoenberg teaches, in figure 2A, and 2B and column 7, lines 22-43, a menu bar with icons providing manipulation of the screen into multiple quadrants, where in the quadrants categories are listed in different order this menu bar containing two icons with a plus sign encapsulated by a circle with a line either above or below the circle ( a symbol known in the art to provide rearrangement of items in a list). It would have been obvious to one of ordinary skill in the art, having the teachings of Schoenberg before him at the time the invention was made to realize that most tabular programs have a means of reordering entries/categories based on some sort of least to greatest or greatest to least ordering, using a icon similar to that of Schoenberg. This is further usually done through the selection of such an icon.

14. Claims 8, 11-14, and 19 are rejected under 35 U.S.C. 103(a) as being unpatentable over Schoenberg and Schwuttke et al., Patent #6,222,547, hereinafter Schwuttke.

15. With regard to claim 8, Schoenberg teaches, in column 7, lines 32-43, column 4, line 5, and in figure 2A, a networked system for providing medical data in a time indicated form, with user changeable settings; in column 7, lines 22-31, a displayed menu bar; in column 7, lines 22-43, and in figure 2A, a customizable menu for selecting

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parameters to be displayed in tabular and graphical views; in column 6, lines 38-41, the users ability to view medical graphics in graphic-only, tabular-only, or graphic/tabular display forms; , in column 7, lines 22-36, the offering to the user of up to four simultaneous displays where each of the data sets can be displayed in a variety of formats including graphical, tabular, bar chart, and pie chars formats, with or without spilt screen; each capable of displaying user selected medical parameters; and in column 7, lines 22-43, and in figures 2A and 2B, the display of only graphical data or only tabular data where selection of elements is made via icons on a menu bar (Vital, Resp., Hematology, Validate), and through selection of a parameter icon, providing the graphical (and/or tabular) representation of the selected parameter to be displayed. Schoenberg, however, doesn't specifically mention user selection of a set of default parameters. Schwuttke teaches a system for displaying medical parameters in both graphical and tabular views (see column 12, lines 14-25 and figure 2), but further teaches the user selectable default parameter set (see column 10, line 65 through column 11, line 9). It would have been obvious to one of ordinary skill in the art, having the teachings of Schoenberg and Schwuttke before him at the time the invention was made to modify the medical information visualization system of Schoenberg to include the setting of default parameters as did Schwuttke. One would have been motivated to make such a combination because the setting of defaults provides a good starting point for collecting specific information on a machine that can be transferred between very different environments.

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16. With regard to claim 11, which teaches the customization menu enabling user definition of a plurality of default parameter sets, Schoenberg teaches, in column 7, lines 22-43, and in figure 2A, a customizable menu for selecting parameters to be displayed in tabular and graphical views, and Schwuttke further teaches, the user selectable default parameter set (see column 10, line 65 through column 11, line 9).

17. With regard to claim 12, which teaches the categories include at least two associated with medical categories, Schoenberg teaches, in column 7, lines 22-53, and in figure 2A, the categories including homodynamic function, neurology, laboratory results, and other such medical measurements.

18. With regard to claim 13, which teaches the customization menu further comprising placement selection icons for re-ordering display of selected parameters, Schoenberg teaches, in figure 2A, a menu bar with two icons which both include a plus sign but have a line connected to it in opposite directions, It would have been obvious to one of ordinary skill in the art, having the teachings of Schoenberg before him at the time the invention was made to realize that most tabular programs have a means of reordering entries based on some sort of least to greatest or greatest to least ordering. This is further usually done through the selection of such an icon.

19. With regard to claim 14, which teaches the customization menu further comprising category selection icons for re-ordering display of available categories of medical parameters for user selection, Schoenberg teaches, in figure 2A, and 2B and column 7, lines 22-43, a menu bar with icons providing manipulation of the screen into multiple quadrants, where in the quadrants categories are listed in different order, It

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would have been obvious to one of ordinary skill in the art, having the teachings of Schoenberg before him at the time the invention was made to realize that most tabular programs have a means of reordering entries/categories based on some sort of least to greatest or greatest to least ordering. This is further usually done through the selection of such an icon.

20. With regard to claim 19, which teaches a user being able to select a third of said medical parameter labels from said menu for display in said first window for display in graphical format and said second window for display in tabular format, Schoenberg teaches, in column 7, lines 22-36, the offering to the user of up to four simultaneous displays where each of the data sets can be displayed in a variety of formats including graphical, tabular, bar chart, and pie charts formats, with or without split screen; each capable of displaying user selected medical parameters, where selection of elements is made via icons on a menu bar (Vital, Resp., Hematology, Validate), as is the user enabled to select a different medical parameter for display in each of the plurality of windows (in this case a graphical one and a tabular one), the user is able to select the same medical parameter, in both windows, which is visible in all of the windows of figure 2B.

### ***Response to Arguments***

21. The arguments filed on 4-11-05 have been fully considered but they are not persuasive. Reasons set forth below.

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22. The applicants' argue that Schoenberg teaches "a display menu generator for generating, a single customization menu enabling user selection of parameters for display in a first graphical format and in a second tabular format."

23. In response, the examiner respectfully submits that Schoenberg teaches, in column 6, lines 38-41, the users ability to view medical graphics in graphic-only, tabular-only, or graphic/tabular display forms; and in column 7, lines 22-43, and in figures 2A and 2B, a menu bar for selecting which elements are to be displayed in the graphical and/or tabular representation of the selected parameters. This single menu in figure 2B is the one with the screen division icons.

24. The applicants' argue that Schoenberg teaches "a menu containing a set of medical parameter labels."

25. In response, the examiner respectfully submits that Schoenberg teaches, in column 7, lines 28-36, a menu containing a plurality of medical parameters (Vital Signs, Respiration, Hematology, and Blood Gases).

26. The applicants' argue that Schoenberg teaches "parameter selection icons enabling user selection of medical parameter labels from the menu."

27. In response, the examiner respectfully submits that Schoenberg teaches, in column 7, lines 28-36, a menu containing a plurality of selectable medical parameters. These medical parameters being selectable tabs in the menu display.

28. The applicants' argue that Schoenberg teaches "a first window for displaying a list of user selected ones of said plurality of available medical parameters for display in

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a general format, a second window for displaying a list of user selected one of said plurality of available medical parameters for display in a tabular format”.

29. In response, the examiner respectfully submits that Schoenberg teaches, in column 7, lines 22-36, the offering to the user of up to four simultaneous displays where each of the data sets can be displayed in a variety of formats including graphical, tabular, bar chart, and pie charts formats, with or without split screen; each capable of displaying user selected medical parameters.

30. The applicants’ argue that Schoenberg teaches “a user being able to configure a user interface image display by selecting a first of said medical parameter labels from said menu for display exclusively in graphical format and a second of said medical parameter labels from said menu for display -exclusively in tabular format.”

31. In response, the examiner respectfully submits that Schoenberg teaches, in column 6, lines 38-41, the users ability to view medical graphics in exclusively graphic-only, exclusively tabular-only, or graphic/tabular display forms; and in column 7, lines 22-43, and in figures 2A and 2B, the display of only graphical data or only tabular data where selection of elements is made via icons on a menu bar (Vital, Resp., Hematology, Validate), and through selection of a parameter icon, providing the graphical (and/or tabular) representation of the selected parameter to be displayed.

32. The applicants’ argue the combination of the Schoenberg reference and the Schwuttke reference.

33. In response, the examiner respectfully submits that Schwuttke teaches a system for displaying medical parameters in both graphical and tabular views (see column 12,

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lines 14-25 and figure 2) and further points out the benefit of providing a graphical display with the tabular data (see column 3, lines 19-45), and, as pointed out by the applicant, relationships between data sets, similar to that of Schoenberg.

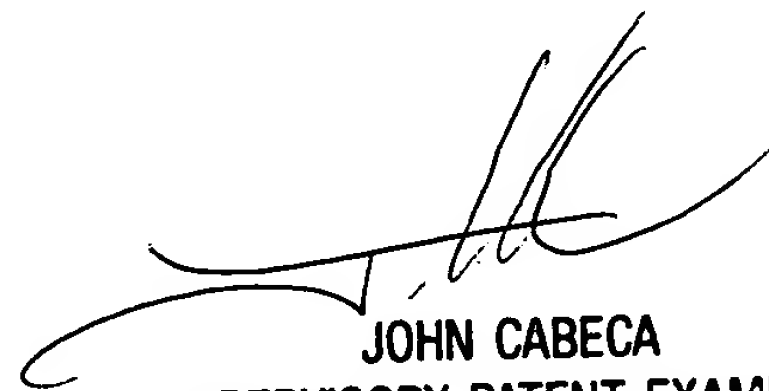
***Conclusion***

34. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Dennis G. Bonshock whose telephone number is (571) 272-4047. The examiner can normally be reached on Monday - Friday, 6:30 a.m. - 4:00 p.m.

35. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, John Cabeca can be reached on (571) 272-4048. The fax phone number for the organization where this application or proceeding is assigned is 703-872-9306.

36. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

1-12-05  
dgb

  
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